



**Affidavit and Application for obtaining
DUPLICATE CERTIFICATE OF TITLE
Fee: Fifteen Dollars (\$15.00)**

Bring or Mail Application to: Fremont County Clerk, 450 N. 2nd St. Room 220, Lander WY 82520

FOR OFFICE USE ONLY - COMPLETE BEFORE PROCESSING - FOR OFFICE USE ONLY

Date application is received _____
 Deputy's Initials _____
 LIENS: YES _____ NO _____
 _____ Tyler _____ CSA
 _____ Sales Tax Hold File
 _____ Hold File & Return Work
 _____ NMVITS (only once)

PAYMENT TYPE: CASH ___ **CHECK** ___ **OR**
CREDIT CARD # _____ **EXP** ___/___
NAME ON CARD _____ (security code _____)

I/we hereby, make application for a duplicate Wyoming Certificate of Title for the following motor vehicle, trailer, watercraft or mobile home, as described below (please print):

Name(s) on Title _____ **Daytime Phone#** _____

Title #: _____ **Year:** _____ **Make:** _____ **VIN/HIN #:** _____

and to the best of my knowledge and belief the said original Certificate of Title has been mutilated, lost, or destroyed, and that it is not assigned to or in the possession of any other person, and there are no additional liens on said motor vehicle other than shown on the original Certificate of Title.

I hereby make application for a duplicate Certificate of Title covering the said motor vehicle and authorize the same to be **mailed to:** (only fill out if we are to mail the Duplicate Title)

Name: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____ **Daytime Phone #** _____

I/we hereby swear or affirm under penalty of perjury that all of the information on this application for Duplicate Certificate of Title is true and correct and that I/we am/are lawfully applying for a Wyoming Certificate of Title.

I/we understand that once a duplicate title is issued on this request that the original, if found, is **invalid** and must be destroyed.

SIGNATURE OF OWNER _____ **Print Name** _____

SIGNATURE OF OWNEER _____ **Print Name** _____

NOTARY STATEMENT

_____ appeared before me in the State of _____ County of _____
 on this _____ day of _____ 20____.

County Clerk or Notary Public _____

My Commission Expires: _____

Mailed to: _____ **Date Issued:** _____ **Title No:** _____